# P10000095748

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C. LEINIS

AUGAA 2013

EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2013

FRANCISCO J. RODRIGUEZ / F & Y CLAIMS ADJUSTING INC 7900 NW 6TH ST #104 PEMBROKE PINES, FL 33024

SUBJECT: F & Y CLAIMS ADJUSTING INC.

Ref. Number: P10000095748

We have received your document for F & Y CLAIMS ADJUSTING INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment must be adopted in one of the following manners:

(1)If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a)A statement that the number of votes cast for the amendment by the

shareholders was sufficient for approval, -or-

(b)If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

### (2)If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a)A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 313A00019376

#### **COVER LETTER**

TO: Amendment Sect Division of Corp					
NAME OF CORPORATION: F & Y Claims Adjusting					
DOCUMENT NUMBER: P10000095748					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this mat	tter to the following:			
	Francisco J Rodri	iguez			
		Name of Contact Persor			
F & Y Claims Adjusting Inc					
Firm/ Company					
	7900 NW 6TH ST	Γ #104			
		Address	<del></del>		
Pembroke Pines, FL 33024					
		City/ State and Zip Code			
fra	nciscorodriguezg2	010@hotmail.co	om		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Francisco J	Rodriguez	at ( 954	, 673 05 36		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation

FILED 13 AUG 19 PM 12: 41

F & Y Claims Adjusting (Name of Corporation as currently filed with the Florida Dept. of State) P10000095748 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Florida Claims Advisors Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 111 NW 183rd ST ste 404 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Miami, FL 33169-4540 C. Enter new mailing address, if applicable: 111 NW 183rd ST ste 404 (Mailing address MAY BE A POST OFFICE BOX) Miami, FL 33169-4540 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	John Do	e	•
X Remove	<u>v</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change				7900 NW 6TH ST #104
X Add				111 NW 183rd ST ste 404
Remove				
2) Change				
Add				
Remove				
3) Change	- <del></del>	_		
Add			,	·
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		<del></del>		
Panyoua				
PANIOUA				

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
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If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	endment if not contained in the amendment itsert.	
	•	
	•	

The date of each amendment(s) adoption:	FILED, if other than the
date this document was signed.	13 AUG 19 PM 12: 41
Effective date if applicable:	
(no more tha	nn 90 days after amendment file STERETARY UF STATE TALLAHASSEE. FLORIDA
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes east for the amendment(s)
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
"The number of votes east for the amendment(s) was	were sufficient for approval
. by	
. (voting group)	
The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators	without shareholder action and shareholder
action was not required.  Dated 8 6 2013	
35 Signature X Trumuseo	Proeli grea
	officer – if directors or officers have not been in the hands of a receiver trustee, or other court ary)
<sub>റ</sub> √് Francisco J	Rodriguez
(Typed	or printed name of person signing)
President	·

(Title of person signing)